

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) GREAT AMERICA PAC			FEC IDENTIFICATION NUMBER ▼ C C00608489		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee CONNELL DONATELLI, INC			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">08 / 23 / 2016</div>		
Mailing Address PO BOX 1877			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">10000.00</div>		
City ALEXANDRIA		State VA	Zip Code 22313		Transaction ID : SE24.91310
Purpose of Expenditure ONLINE VOTER CONTACT		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">08 / 23 / 2016</div>	
Name of Federal Candidate DONALD J TRUMP			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> District: _____			State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px;">6593465.33</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee CONNELL DONATELLI, INC			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px;">08 / 24 / 2016</div>		
Mailing Address PO BOX 1877			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px;">10000.00</div>		
City ALEXANDRIA		State VA	Zip Code 22313		Transaction ID : SE24.91311
Purpose of Expenditure ONLINE VOTER CONTACT		Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div>		Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px;">08 / 23 / 2016</div>	
Name of Federal Candidate DONALD J TRUMP			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> District: _____			State: _____		
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px;">6593465.33</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;">20000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px;">20000.00</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Dan Backer
 Signature

[Electronically Filed]

Date

08 / 23 / 2016